Academic Year-2022-23 Shri Bajrang Power & Ispat Ltd Scholarship

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Nurturing Excellence among Students

APPLICATION FOR FINANCIAL ASSISTANCE (RENEWAL)

Last date of Application: 31.10.2023



Renewal

Paste recent colour passport size

1. Personal Data:

(a) Student's	(a) Student's Name: (in capital letters): Ms./Mr.												har No.:				
(b) Date of birth: District:							Block:			Nearest Town			Eman	Email Id:			
(c) Father's Name:							Age:			Education:			Aadhar No.:				
Father's Occ	upation	(in det	ail):						<u> </u>								
(d). Mother's Name: Age:								Education:			Occupation:			Aadhar No. :			
(f). Communi	ty to w	nich be	longs:	GEN/SC	C /ST/OBC	C/Others					Re	ligion:					
(g)Brothers an		s with	age Oc	cupation	/ Class in	which stud											
Sl.No. Na	Sl.No. Name					Age	Occu	pation/Class of Stud		ss of Study	School/Co		l/College	llege of study			
2. Address: (I						•		_									
Present Address: (for correspondence)								Permanent address:									
PIN:									PIN:								
Contact Phone Number:									Contact Phone Number:								
3. Academic	Record:	1						•									
Name of the Examination Passed		Year of completion		Name of Board/Univers			y Fu Ma	ull rks		farks ma tained sec		KS R	Universit Legistratio [o./ Roll N	ation Activities if any			
Matriculation	n										d						
+2 Arts/Sc/Co																	
+3 Arts/Sc/Co	om																
B.Tech/MBBS	S																
Others	,																
1 Doutionland	of Cour	ee whe	MO FOIL	ore stud	vina												
A. Particulars Name of Course	Dura	Vear		of Name &		z address o ege/Institute	ins	/pe of stitutio ovt/ Pv	on	University Board		coll fo	Rank in JEE/CET DET/ AIEEE, NEET et	T/	Year of Exam	Basis of Seat Allotment(Fr ee/Payment)	
İ																	
(Use separate	paper, i	f requi	ired)		l							<u>1</u> _				I	
5. Scholarshine	s/Finan	ial assi	stance r	eceived	till date:												
5. Scholarships/Financial assistance received till date: (Name of the Organization) Received from: Year							Amount (Rs.)						Remarks				
6. Have you a the Bank, date										If yes, th	en giv	e details	like name	and	address, ph	one No. of	

7. If sanctioned, give amount:.....

8. Expenses for the Last year and estimate for Current Academic Year: Last year Expenditure Estimated expenses of this year(Rs.) **Admission Fees Tution Fees** University Regn. Fees Hostel Fees(Seat Rent) Messing Exp Transportation **Books 7 stationery** Others(specify Name and Address of the Bank 10. Declaration by the Student: I hereby declare that the information given above in this application is true and correct. I also pledge that upon completion of my study I shall return the amount of assistance received through the Trust, within 5 years which will be used as similar assistance to other needy and meritorious students. Name of the Applicant Signature of Applicant Date (in Capital letter) 11. Undertaking by the father: I hereby declare that the information given by my Son/Daughter/Ward is true and correct. I promise to persuade my ward to return the assistance on his / her working with 5 years for use as assistance to other needy students. experience time. If he / she fails to return, I will return the amount Name of father / Mother Signature of father /mother Date Mob No.: 12. Certificate by the College Authorities: Certified that Sri /Kum is a student of our college and is now studying in If he/she is getting any other assistance, please mention the source and amount. Signature: Name: ______Designation: ______Date: With college seal:

Important: Following documents must be attached; otherwise the application will be rejected.

- 1. Copies of Mark Sheets of all Semesters of Last Year.
- 2. Copies of Receipts of College Fees and Hostel Fees paid during the year.
- 3. A letter addressed to the Donor, giving details of activities in the college during past 6 months in minimum 200 words
- 4. For final Year Students, the mark sheets, pass certificate with latest postal & E-mail address are to be sent after completion of their study.
- 5. If father is deceased, mother's undertaking to repay the assistance required.
- 6. Applications will not be considered without correct e-mail id.

Address for Communication: VIKASH EDUCATIONAL CHARITABLE TRUST

'ROSE DALE', 139, District Center, Chandrasekharpur, Bhubaneswar-751016 E-mail:vectrust@yahoo.com, Website: www.vikas.org.in